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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/533,286	04/29/2005	Atsuo Okaichi	050222	6018
23850 7590 11/02/2007 KRATZ, QUINTOS & HANSON, LLP 1420 K Street, N.W.			EXAMINER	
			TRIEU, THERESA	
Suite 400 WASHINGTON, DC 20005			ART UNIT	PAPER NUMBER
			3748	
	,			
			MAIL DATE	DELIVERY MODE
			11/02/2007	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

· ·	Application No.	Applicant(s)			
Interview Summary	10/533,286	OKAICHI ET AL.			
interview Summary	Examiner	Art Unit			
	Theresa Trieu	3748			
All participants (applicant, applicant's representative, PT	O personnel):				
(1) <u>Theresa Trieu</u> .	(3)				
(2) James Baker (Reg. No.: 40,899).	(4)				
Date of Interview: 01 November 2007.					
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant	2) applicant's representativ	ve]			
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊡ No.				
Claim(s) discussed: <u>claims 1, 2, 4, 5, 6, 8, 23, 26, 29 and 30</u> .					
Identification of prior art discussed: <u>IDS filed on Oct. 16, 2007</u> .					
Agreement with respect to the claims f) \boxtimes was reached.	g) was not reached. h)	N/A.			
Substance of Interview including description of the gener reached, or any other comments: <u>The IDS have been file 10, 2007; therefore, applicant agrees to file RCE</u> .					
(A fuller description, if necessary, and a copy of the ame allowable, if available, must be attached. Also, where no allowable is available, a summary thereof must be attach	copy of the amendments that				
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGE INTERVIEW DATE, OR THE MAILING DATE OF THIS IN FILE A STATEMENT OF THE SUBSTANCE OF THE INT requirements on reverse side or on attached sheet.	he last Office action has alread R OF ONE MONTH OR THIRT NTERVIEW SUMMARY FORM	y been filed, APPLICANT IS TY DAYS FROM THIS , WHICHEVER IS LATER, TO			
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		hur			
		RESATRIEU RY EXAMINER			
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Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.	Examiner's sig	nature, if required			